Application Data Sheet

Application Information

Regular Application Type:: Utility

Subject Matter::

Suggested Classification:: Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

None Sequence Submission?:: Computer Readable Form (CRF):: No 0 Number of copies of CRF::

ILLUMINATING SYSTEM HAVING Title::

No

SEQUENTIAL COLOR FILTERING AND A HIGH-PRESSURE DISCHARGE LAMP

03P06168 Attorney Docket Number::

No Request for Early

Publication?::

Request for Non-Publication?:: Suggested Drawing Figure::

Total Drawing Sheets::

No Small Entity?::

Latin Name::

Variety Denomination Name:: Petition Included ?:: No

Petition Type::

Licensed US Gov't Agency:: Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Inventor Applicant Authority Type:: Primary Citizenship Country:: GERMANY

Full Capacity Status::

FLORIAN Given Name::

Middle Name::

HEIKE Family Name:: TAIPEI City of Residence::

State or Province of Residence::

TAIWAN R.O.C. Country of Residence::

Street of Mailing Address:: 3F-4, 3 SUNG CHIANG RD.

City of Mailing Address:: TATPET

State or Province of Mailing Address:: Country of Mailing Address:: TAIWAN R.O.C.

Postal or Zip Code of Mailing Address:: 104

Applicant Authority Type:: Inventor Primary Citizenship Country:: GERMANY

Full Capacity

Status:: ANDREAS Given Name::

Middle Name::

HUBER Family Name:: MAISACH

City of Residence::

State or Province of Residence::

GERMANY Country of Residence:: Street of Mailing Address:: RIEDLSTR. 34

City of Mailing Address:: MAISACH

State or Province of Mailing Address:: Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: 82216

Applicant Authority Type:: Inventor Primary Citizenship Country:: GERMANY

Full Capacity Status::

SIMON Given Name::

Middle Name::

LANKES Family Name:: City of Residence:: FALKENSEE

State or Province of Residence::

GERMANY Country of Residence::

Street of Mailing Address:: SEEPROMENADE 31B

City of Mailing Address:: FALKENSEE

State or Province of Mailing Address::

Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: 14612

Applicant Authority Type:: Inventor GERMANY

Primary Citizenship Country:: Full Capacity Status::

ANDREAS Given Name::

Middle Name::

OSTEN Family Name:: CONCORD

State or Province of Residence:: NEW HAMPSHIRE UNITED STATES Country of Residence::

Street of Mailing Address:: 62 WASHINGTON STREET, APT. #1

CONCORD City of Mailing Address::

State or Province of Mailing Address:: NEW HAMPSHIRE

Country of Mailing Address:: UNITED STATES Postal or Zip Code of Mailing Address:: 03301

Correspondence Information

City of Residence::

Correspondence Customer Number:: 24,252

Name::

Street of Mailing Address::

OSRAM SYLVANIA

100 Endicott Street

City of Mailing Address::

Danvers

Massachusetts

State or Province of Mailing

Address::

Country of Mailing Address::

United States

Postal or Zip Code of Mailing

01923

Address:::

Phone Number::

978-777-1900

Fax Number::

E-Mail Address::

Representative Information

| Representative Customer Number:: | 24,252 |
|----------------------------------|--------|
| | |

Domestic Priority Information

| Application:: | Continuity Type:: | Parent | Parent |
|------------------|-------------------|-------------------|---------|
| | | Application:: | Filing |
| | | | Date:: |
| This application | National Stage of | PCT/DE2004/000870 | 4/26/04 |
| | | | |

Foreign Priority Information

| Country:: | Application | Filing Date:: | Priority |
|-----------|-------------|---------------|-----------|
| | Number:: | | Claimed:: |
| GERMANY | 10319571.8 | 4/30/03 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::